

BEST AVAILABLE COPY

SECRET

REQUEST FOR APPROVAL OR INVESTIGATIVE ACTION <small>(Always handcarry 1 copy of this form)</small>		DATE 4 Jan. 1965	
TO:	<input checked="" type="checkbox"/> CI/Operational Approval and Support Division		FROM:
	Security Support Division/Office of Security		
SUBJECT: (True name) RASKAUSKAS, Ernest C.		PROJECT	
CRYPTONYM, PSEUDONYM, AKA OR ALIASES		CI/OA FILE NO.	
		RI 201 FILE NO.	
		SO FILE NO.	
TYPE ACTION REQUESTED			
<input type="checkbox"/> PROVISIONAL OPERATIONAL APPROVAL		<input type="checkbox"/> PROVISIONAL PROPRIETARY APPROVAL	
<input type="checkbox"/> OPERATIONAL APPROVAL		<input type="checkbox"/> PROPRIETARY APPROVAL	
<input type="checkbox"/> PROVISIONAL COVERT SECURITY APPROVAL		<input type="checkbox"/> COVERT NAME CHECK	
<input type="checkbox"/> COVERT SECURITY APPROVAL		<input type="checkbox"/> SPECIAL INQUIRY (SO field investigation)	
<input type="checkbox"/> COVERT SECURITY APPROVAL FOR LIAISON WITH U.S. OFFICIALS			
USE OF INDIVIDUAL OR ACTION REQUESTED			
SPECIFIC AREA OF USE			
FULL DETAILS OF USE <p style="text-align: center;"> FBI traces are requested on Subject who is acting as attorney in a case involving an unpaid SR agent. </p> <div style="text-align: right; margin-top: 20px;"> DECLASSIFIED AND RELEASED BY CENTRAL INTELLIGENCE AGENCY SOURCES METHODSEXEMPTION 382B NAZI WAR CRIMES DISCLOSURE ACT DATE 2008 </div>			
INVESTIGATIVE COVER			
<input checked="" type="checkbox"/> IS OR WILL SUBJECT BE AWARE OF U.S. GOVERNMENT INTEREST IN HIM?		<input type="checkbox"/> YES	<input type="checkbox"/> NO
<input type="checkbox"/> IS OR WILL SUBJECT BE AWARE OF CIA INTEREST IN HIM?		<input type="checkbox"/> YES	<input type="checkbox"/> NO
INDICATE SPECIAL LIMITATIONS OR COVERAGE DESIRED IN THE SECURITY OFFICE INVESTIGATION			
IF NO INVESTIGATION OUTSIDE CIA, EXPLAIN FULLY			
PRO AND GREEN LIST STATUS			
<input checked="" type="checkbox"/> PRO 1, OR EQUIVALENT, IN (2) COPIES ATTACHED		<input type="checkbox"/> PRO 11 WILL BE FORWARDED	
<input type="checkbox"/> PRO 11, OR EQUIVALENT, IN (1) COPY ATTACHED		<input type="checkbox"/> GREEN LIST ATTACHED, NO:	
FIELD TRACES			
<input type="checkbox"/> NO RECORD		<input type="checkbox"/> NO INFORMATION OF VALUE	
<input type="checkbox"/> DEROGATORY INFORMATION ATTACHED, WITH EVALUATION		<input type="checkbox"/> NOT INITIATED (Explanation)	
<input type="checkbox"/> WILL BE FORWARDED			
RI TRACES (Derogatory Information and Evaluation Attached)			
<input type="checkbox"/> NO RECORD	<input type="checkbox"/> RECORD	<input checked="" type="checkbox"/> NON-DEROGATORY	<input type="checkbox"/> DEROGATORY
DIVISION TRACES (Derogatory Information and Evaluation Attached)			
<input type="checkbox"/> NO RECORD	<input type="checkbox"/> RECORD	<input type="checkbox"/> NON-DEROGATORY	<input type="checkbox"/> DEROGATORY
SIGNATURE OF CASE OFFICER <div style="border: 1px solid black; padding: 2px; display: inline-block;"> SR/O/AC </div>		EXTENSION 4205	
		SIGNATURE OF BRANCH CHIEF <div style="border: 1px solid black; padding: 2px; display: inline-block;"> CSR/O/AC </div>	